February	22,	2013
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Good morning Mr. Wanzenried,

SENATE PUBLIC HEALTH, WELFARE & SAFETY
EXHIBIT NO 3
DATE: 2.22.13
BILL NO. 68 323

Thank you for your request and interest in a pharmacist's point of view on SB 311 and SB 323. As a licensed pharmacist providing pharmaceutical services to Montanans for over 35 years, and now employed by the Department of Labor and Industry, Business Standards Division, Health Care Licensing Bureau, I offer the following information on these subjects.

With regards to SB 311: Amending sections 50-32-203 and 50-32-221 of MCA. The wording and renumbering changes in this section may not be cause for concern; however, I am not sure that the amendments that add new subsection two(2) in each area are needed. Currently, Administrative Rules of Montana, 24.174.1412(1) deals with additions, deletions, and rescheduling of dangerous drugs, and already ties the Board of Pharmacy to adopting the most current schedule of dangerous drugs as defined in 21 CFR (Code of Federal Regulations) 1308. Because the Board of Pharmacy follows CFR guidelines for scheduling, I'm not sure adding new subsection (2) to 50-32-221 would be necessary.

Regarding SB 323: An Act requiring a query of the Prescription Drug Registry (PDR) prior to dispensing a CII or CIII prescription to certain patients. It is my understanding that the PDR was created last legislative session to address and screen for potential issues associated with the prescribing and dispensing of medications. However, I want to point out current provisions of the PDR which may be contrary or related to the proposals in SB 323. Current 37-7-1506(7), MCA states "the procedures established by the board under this section may not impede patient access to prescription drugs for legitimate medical purposes." Additionally, 37-7-1507(2)(b), MCA states that a person is not subject to liability for "receiving, using or relying on, or not using or relying on information received pursuant to 37-7-1502 through 37-7-1506." The PDR was created to provide a useful tool for practitioners to use as necessary in the treatment and care of their patients. The PDR does not presently mandate how practitioners care for those patients.

Again, Thank you for the opportunity to provide this information regarding these bills, as I appreciate all of the work done legislatively for all of our Montana citizens. Please do not hesitate to contact me if I can be of further assistance. In the event an official position by the Board of Pharmacy is requested, a telephonic board meeting will need to be scheduled to do so. I will be out of the office March 01-March 17, 2013; please contact the Board's office (at (406) 841-2371 / (406) 841-2356 or dlibsdpha@mt.gov) during that time.

Respectfully,

Bill Sybrant RPH Compliance Officer Montana Board of Pharmacy bsybrant@mt.gov 406-841-2371